## GREENWOOD POLICE CITIZEN COMPLAINT REPORT

Your Name	
Home Address Phone ( )	
Work AddressPhone ( )	
Today's Date Date and Time of Incident	
Location of Incident	
Name(s) of Police Employee(s) Involved (if known)	
Name(s) of Witness(s)	
Address	
Phone ( )( )( )	
Additional witness information attached.	
Did you speak to a supervisor at the Greenwood Police Dept. regarding the i	incident? YES N
Would you like to speak to a supervisor prior to making a formal complaint	? YES NO
If you've already spoken to a supervisor, name of supervisor:	
Statement of Incident	
Statement of	
Written by	
Date Time	
Narrative	

SignedAdditional documents attached YES NO
DO NOT WRITE BELOW THIS LINE-FOR DEPARTMENT USE ONLY)
Supervisor's Comments:
Name of Supervisor receiving complaint:
Copy to Complainant? YES NO Date Emp. Int
Forwarded to Office of the Chief: Date Emp. Int.